Prefix Serial DATE RECEIVED

RECEIVED 2006

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Idaho Trust Bancorp 2006 Offering

Filing Under (Check box(es) that apply):

3155

[] Rule 504 [] Rule 505 [X] Rule 506 [] Section 4(6) [] ULOE

Type of Filing: [X] New Filing [] Amendment

A. BASIC IDENTIFICATION DATA

1. Enter the information requested about the issuer

Name of Issuer (___ check if this is an amendment and name has changed, and indicate change.) Idaho Trust Bancorp

Address of Executive Offices (Number and Street, City, State, Zip Code) 300 Main Street, Suite 250, Boise, Idaho 83702

Telephone Number (Including Area Code)

(208) 373-6500

Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) N/A

Brief Description of Business: Bank holding company.

Type of Business Organization

[x] corporation

[] limited partnership, to be formed [] business trust

[] limited partnership, already formed [] other (please specify): limited liability company

Actual or Estimated Date of Incorporation or Organization:

Month Year [02] [1999]

[X] Actual [] Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq.

or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

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Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part É and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION: Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a

federal notice.

A. BASIC IDENTIFICATION DATA

Each promoter of the is Each beneficial owner h of equity securities of th Each executive officer a issuers; and Each general and mana	ssuer, if the inaving the posterior in a suer; and director of the sue	ssuer has been organ ower to vote or dispose of corporate issuers and	e, or direct the vote or dis d of corporate general an	position of, 109	
Check Box(es) that Apply: [] P	Promoter [] Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or
Full Name (Last name first, if in Prohaska, Daniel	dividual)				Managing Partner
Business or Residence Address 300 Main Street, Suite 250, Bois			Zip Code)		
Check Box(es) that Apply: [] P	Promoter [] Beneficial Owner	[X] Executive Officer	[X] Director	[] General and/or
Full Name (Last name first, if in Prohaska, Thomas	dividual)				Managing Partner
Business or Residence Address 300 Main Street, Suite 250, Bois	s (Number a se, Idaho 83	nd Street, City, State, 702	Zip Code)		
Check Box(es) that Apply: [] P	Promoter [] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if inc Bratton, Phillip D.	dividual)				Managing Faither
Business or Residence Address 300 Main Street, Suite 250, Bois			Zip Code)		
Check Box(es) that Apply: [] P	Promoter [] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in Ripke, Thomas F.	dividual)				managing rainties
Business or Residence Address 300 Main Street, Suite 250, Bois			Zip Code)		
Check Box(es) that Apply: [] P	Promoter [] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in McDonald, Debbie S.	dividual)				managing rather
Business or Residence Address 300 Main Street, Suite 250, Bois			Zip Code)		
Check Box(es) that Apply: [] P	Promoter [] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if in Baker, Matthew J.	dividual)				Wanaging Fattier
Business or Residence Address 300 Main Street, Suite 250, Bois			Zip Code)		
Check Box(es) that Apply: []P	Promoter [] Beneficial Owner	[] Executive Officer	[X] Director	[] General and/or Managing Partner
Full Name (Last name first, if inc Harris, David L.	dividual)				Michiaging Faither
Business or Residence Address			Zip Code)		

Check	Box(es)	that Ap	ply: [] P	romoter	[] Be	eneficial (Owner	[]Exe	cutive Off	icer	[X] Directo	or []	General and/or Managing Partner
Full Na Jones	ame (Las , Richard	t name H.	first, if in	dividual)									Managing Faither
				s (Numbe se, Idaho		treet, Cit	y, State,	Zip Cod	e)				
Check	Box(es)	that Ap	ply: [] P	romoter	[] Be	eneficial (Owner	[]Exe	cutive Off	icer	[X] Directo	or []	General and/or
	ame (Las h, James		first, if inc	dividual)									Managing Partner
				s (Numbe se, Idaho		treet, Cit	y, State,	Zip Cod	e)				
					B. INF	ORMATI	ION ABO	OUT OFF	ERING				
1. Has				the issue ppendix,					investors	in this	offering?.	••••••	Yes[X] No[]
			n investm ment disc		will be a	accepted	from an	ıy individı	Jal?		***************************************		\$100,002
3. Doe	s the off	ering pe	rmit joint	ownersh	ip of a s	single un	it?						Yes[X] No[]
any co the off SEC a	mmissio ering. If a ind/or wit	n or sim a persor h a state	ilar remu to be lis or state	ineration ted is an is, list the	for solid associa name	citation of ated pers of the bro	f purcha on or ag oker or o	sers in co jent of a l lealer. If	onnection broker or more thar	with sa dealer i five (5	directly or ales of sec registered) persons at broker	curities with the tobel	in ne isted
Full Na	ame (Las	t name	first, if inc	dividual)									
Busine	ss or Re	sidence	Address	(Numbe	r and S	treet, Cit	y, State,	Zip Cod	e)				
Name	of Assoc	iated Br	oker or D	Dealer									
				Has Solici Iividual St				Purchase	ers				[] All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	(17 m cance
Full Na	ame (Las	t name	first, if inc	dividual)									
Busine	ss or Re	sidence	Address	(Numbe	r and S	treet, Cit	y, State,	Zip Cod	e)				
Name	of Assoc	iated Br	oker or E	Dealer									
				Has Solici									F1 All Ctates
(Check [AL] [IL] [MT]	("All Sta [AK] [IN] [NE]	tes" or o [AZ] [IA] [NV] [SD]	ENECK ING [AR] [KS] [NH]	ividual St [CA] [KY] [NJ] [TX]	(ates) [CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]	[] All States

} V :

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Name of Associated Broker or Dealer				
		[] All States		
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MT] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [HI] [ID] MS] [MO] OR] [PA] WY] [PR]			
(Use blank sheet, or copy and use additional copies of this sheet, as r	necessary.)			
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS			
1. Enter the aggregate offering price of securities included in this offering and the total amour already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	nt ,			
Type of Security	Aggregate Offering Price	Amount Aiready Sold		
Debt	\$ \$5,000,016	\$ \$5,000,016		
Convertible Securities (including warrants)	\$ \$ \$	\$ \$ \$		
Other (Specify:)	\$5,000,016	\$ 5,000,016		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
	Number Investors	Aggregate Dollar Amount of Purchases		
Accredited Investors	39	\$5,000,016		
Non-accredited Investors Total (for filings under Rule 504 only)	0	\$ <u>O</u> \$5,000,016		
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) month prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. N/A	N/A s			
Type of offering	Type of Security	Dollar Amount Sold		
Rule 505 Regulation A Rule 504	2304,	\$ \$ \$		
Total		D		

the securities in this offering issuer. The information may	all expenses in connection with the issuance and distribution of Exclude amounts relating solely to organization expenses of the be given as subject to future contingencies. If the amount of an nish an estimate and check the box to the left of the estimate.	
Printing and Engraving Co Legal FeesAccounting Fees Engineering Fees	psts cify finders' fees separately)	[] \$ [X] \$ 2,000 [X] \$15,000 [X] \$10,000 [] \$ [] \$
Total		[X] \$27,000
total expenses furnished in re-	en the aggregate offering price given in response to Part C - Questions and the control of the c	on 1 and \$4,973,016 oss
be used for each of the purpo an estimate and check the bo	of the adjusted gross proceeds to the issuer used or proposed to oses shown. If the amount for any purpose is not known, furnish ox to the left of the estimate. The total of the payments listed must ceeds to the issuer set forth in response to Part C - Question 4.b	
		Payments to Officers, Directors, & Payments To Affiliates Others
Purchase of real estate Purchase, rental or leasing of Construction or leasing of Acquisition of other busing may be used in exchange	g and installation of machinery and equipment [plant buildings and facilities [esses (including the value of securities involved in this offering that [for the assets or securities of another issuer pursuant to a]\$ []\$]\$ []\$]\$ []\$]\$ []\$
Repayment of indebtedne Working capital and gene Other (specify): Capital fo	ral corporate purposes]\$]\$]\$]\$ []\$3,973,016]\$
Total Payments Listed (co	lumn totals added)] \$ [X] 4,973,016
	D. FEDERAL SIGNATURE	
The issuer has duly caused th 505, the following signature Commission, upon written recparagraph (b)(2) of Rule 502	is notice to be signed by the undersigned duly authorized person. If the constitutes an undertaking by the issuer to furnish to the U.S. usest of its staff, the information furnished by the issuer to any non-acc	ris notice is filed under Rule Securities and Exchange redited investor pursuant to
Issuer (Print or Type) Idaho Trust Bancorp		Date July 6, 2006
Name of Signer (Print or Typ Daniel Prohaska	e) Title of Signer (Print or Type) President	
	V	

ATTENTION Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

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